Image# 12960677038 PAGE 1 / 16

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

1	or other man An	Authorized	Committee		Office Use Only							
NAME OF TOWNS COMMITTEE (in full)	TYPE OR PRINT ▼		nple: If typin the lines.	ig, type	12FE4M5							
JEWISH COUNCIL FOI	R EDUCATION	AND RESE	ARCH		<u> </u>							
		1 1 1 1 1										
ADDRESS (number and street)	1 PENN PLAZA											
V	SUITE 6171			1 1 1 1			1					
Check if different than previously reported. (ACC)	NEW YORK				NY L	10119						
2. FEC IDENTIFICATION NUI	MBER ▼	CITY 🛦		S	STATE 🛦	ZIP CO	DE 🛦					
C C00452847		3. IS THIS REPORT	~	IEW N) OR	AM (A)	ENDED						
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1 July 15 Quarterly Report (Q2 October 15 Quarterly Report (Q3 January 31 Year-End Report (YE July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)	(c) 12-Day PRE-Election Report for the second secon	Election on tion (12C) 06	Sep Oct 2	in the State of OR) in the	Special (30S)					
5. Covering Period 10	/ D D / Y D	Election on	through	M M M	/ D D /	State of 2012						
I certify that I have examined this Type or Print Name of Treasurer	Report and to the book	est of my know	ledge and b	pelief it is true	e, correct and	l complete.						
Signature of Treasurer Mikhae	el Moore	I.	Electronically	Filed] Da	ate 10	/ D D /	2012					
NOTE: Submission of false, erroned	ous, or incomplete infor	rmation may sub	ject the pers	on signing thi	s Report to th	e penalties of 2 l	J.S.C. §437g.					
Office Use Only						FEC FOR Rev. 12/2						

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2012		194.00
	(b) Cash on Hand at Beginning of Reporting Period	40200.96	
	(c) Total Receipts (from Line 19)	32065.00	279526.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	72265.96	279720.00
7.	Total Disbursements (from Line 31)	23080.96	230535.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	49185.00	49185.00
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	15870.96	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

JEWISH COUNCIL FOR EDUCATION AND RESEARCH

R	eport Covering the Period: From:		10 17 2012
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	1200.00	234700.00
	(ii) Unitemized(iii) TOTAL (add	5865.00	18826.00
	Lines 11(a)(i) and (ii)▶	7065.00	253526.00
	(b) Political Party Committees	0.00	0.00
	(such as PACs)(d) Total Contributions (add Lines	25000.00	25000.00
12.	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) Transfers From Affiliated/Other	32065.00	278526.00
	Party Committees	0.00	0.00
13.	All Loans Received	0.00	1000.00
	Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00
16.	(Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
17	to Federal Candidates and Other Political Committees Other Federal Receipts	0.00	0.00
	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds (a) Non-Federal Account	0.00	0.00
	(from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19.	Total Receipts (add Lines 11(d),	20005-00	270526.00
	12, 13, 14, 15, 16, 17, and 18(c))▶	32065.00	279526.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	32065.00	279526.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
Operating Expenditures: —	Total Tillo I Cilou	Calelidal Teat-10-Date				
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)						
(i) Federal Share	0.00	0.00				
(ii) Non-Federal Share	0.00	0.00				
(b) Other Federal Operating	18272.71	198208.44				
Expenditures(c) Total Operating Expenditures	10272.71	130200.44				
(add 21(a)(i), (a)(ii), and (b))▶	18272.71	198208.44				
Transfers to Affiliated/Other Party						
Committees	0.00	0.00				
Contributions to Federal Candidates/Committees	0.00					
and Other Political Committees	0.00	0.00				
. Independent Expenditures	4808.25	32226.56				
(use Schedule E)	7					
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00				
, , , , , , , , , , , , , , , , , , , ,						
. Loan Repayments Made	0.00	0.00				
-						
. Loans Made	0.00	0.00				
(a) Individuals/Persons Other	0.00	0.00				
Than Political Committees	0.00	0.00				
(b) Political Party Committees	0.00	0.00				
(c) Other Political Committees	7					
(such as PACs)	0.00	0.00				
(d) Total Contribution Refunds	0.00	0.00				
(add Lines 28(a), (b), and (c))▶	7	0.00				
. Other Disbursements	0.00	100.00				
	5.00					
. Federal Election Activity (2 U.S.C. §431(20))						
(a) Allocated Federal Election Activity						
(from Schedule H6)	0.00	0.00				
(i) Federal Share	0.00	0.00				
(ii) "Levin" Share	0.00	0.00				
(b) Federal Election Activity Paid Entirely						
With Federal Funds	0.00	0.00				
(c) Total Federal Election Activity (add						
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00				
Total Disbursements (add Lines 21(c), 22,						
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	23080.96	230535.00				
. Total Federal Disbursements						
(subtract Line 21(a)(ii) and Line 30(a)(ii)						
from Line 31)	23080.96	230535.00				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

1 EO 1 01111 3X (11ev. 02/2003)		i age 3					
III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date					
3. Total Contributions (other than loans) (from Line 11(d), page 3)	32065.00	278526.00					
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00					
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	32065.00	278526.00					
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	18272.71	198208.44					
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00					
8. Net Operating Expenditures (subtract Line 37 from Line 36)	18272.71	198208.44					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

	_		_	MBER	:	PAGE	:	6	OF	16
(0	che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16	;	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using	g the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) JEWISH COUNCIL FOR ED	DUCATION AND RESEARCH	
Full Name (Last, First, Middle Initial) Albert Brown Mailing Address 5714 Guava Drive		Date of Receipt
City Tamarac FEC ID number of contributing federal political committee. Name of Employer	State Zip Code FL 33319 C Occupation	10 14 2012 Transaction ID: SA11AI.9165 Amount of Each Receipt this Period 250.00
Albert R. Brown, DPM PA Receipt For: Primary General Other (specify) ▼	podiatrist Aggregate Year-to-Date ▼ 250.00	-
Full Name (Last, First, Middle Initial) Thomas Durst Mailing Address 1071 Vallejo Street		Date of Receipt 10 17 2012
City San FRancisco FEC ID number of contributing federal political committee.	State Zip Code CA 94133	Transaction ID : SA11AI.9276 Amount of Each Receipt this Period 450.00
Name of Employer none Receipt For: Primary General Other (specify) ▼	Occupation n/a Aggregate Year-to-Date ▼ 450.00	-
Full Name (Last, First, Middle Initial) Virginia P Sybert Mailing Address 1523 Grand Ave City	State Zip Code	Date of Receipt 10 07 2012 Transaction ID: SA11AI.9080
Seattle FEC ID number of contributing federal political committee.	WA 98122	Amount of Each Receipt this Period 500.00
Name of Employer Group Health cooperative Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (options	al)	1200.00
TOTAL This Period (last page this line nur	nber only)	1200.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the			LINE	NU	MBER	PAGE	:	7	OF	16	
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, ,			13		14		15		16		17

	I Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) JEWISH COUNCIL FOR EDU	JCATION AND RESEARCH	
Full Name (Last, First, Middle Initial) A. AMERICAN BRIDGE 21ST CENTU		Date of Receipt
Mailing Address 700 13TH STREET, NW, S		10 09 2012
City WASHINGTON	State Zip Code DC 20005	Transaction ID : SA11C.9308 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00492140	25000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Descirt this Device
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional).		25000.00
TOTAL This Period (last page this line numb	er only)	25000.00

S	CHEDULE B (FEC Form 3X)			1	F NUMBER: PAGE 8 OF 16									
	•	Use sens	arate schedule(s)	\ I -	FOR LINE NUMBER: PAGE 8 OF (check only one)									
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or	for commercial purposes, other than using the nam	ne and addr	ess of any politi	cal committee to	solicit con	ributions	from s	uch con	nmitt	ee.				
\setminus	NAME OF COMMITTEE (In Full)													
$ \rangle$	JEWISH COUNCIL FOR EDUCAT	ΙΩΝ ΔΝ	D RESEAR	CH										
/	JEWISH COUNCIL FOR EDUCAT	ION AN	DINLOLAIN	CII										
_	Full Name (Last, First, Middle Initial)													
Δ	ActBlue Technical Services				Date of Disbursement									
<i>,</i>	Actolue rechnical Services													
	Moiling Addross 44 Amery Chart Cuite 44				M = M		D /	201		Y				
	Mailing Address 14 Arrow Street, Suite 11				10	1	<i>'</i>	201	_					
	City	Stata	Zip Code											
		State MA			Transa	ction ID	: SB21	B.9342						
	Cambridge	IVIA	02138											
	Purpose of Disbursement Credit Card Processing Fees						D: 1							
					Amount	of Each	Disburs	ement t	nis i	eriod				
	Candidate Name			Category/					229	03	1.			
				Type		- 7	7		225	.53	_			
	Office Sought: House Disbursen	nent For:												
	Senate	Primary	General											
	President	Other (spec	cify) 🔻											
	State: District:													
	Full Name (Last, First, Middle Initial)													
В.					Date of	Disburse	ment							
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	Moiling Address 45 Maidea Lana Octo 4000				10		2	201		Υ				
	Mailing Address 15 Maiden Lane, Suite 1600				10	<u> </u>	2	201	12					
	City.	Ctata C	Zin Codo											
	•	State NY	Zip Code 10038		Transa	ction ID	: SB21	B.9332						
	New York Purpose of Disbursement	INI	10036											
	Public Relations Consulting				Amount	of Each	Dioburo	omont t	hio I	Pariod				
	Candidate Name				Amount	UI Lacii	Dispuis	ement	1115 1	enou				
	Candidate Name			Category/				10544.38						
				Type		- 7	7				4.			
	Office Sought: House Disbursen													
		Primary	General											
	President	Other (spec	cify) 🔻											
	State: District:													
	Full Name (Last, First, Middle Initial)													
C.	Bosco Mookie Productions, LLC				Date of	Disburse	ment							
	Boood Modric Froductions, EEC				M M	/ D	D /	Y	V	V				
	Mailing Address 139 North Sycamore Ave				10	0		201		1				
	Maning Address 155 North Systemore Ave				.0				_					
	City	State	Zip Code											
	Los Angeles	CA	90036		Transa	ction ID	: SB21	B.9324						
	Purpose of Disbursement													
	Video Production				Amount	of East	Dich	omort t	hic '	Dorion				
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Ar	y information copied from such Reports and Staten	nents may r	not be sold or us	sed by any pers	on for the	purpose	of solic	iting co	ontrib	utions	6				
or	for commercial purposes, other than using the nam	ne and addr	ess of any politi	ical committee to	solicit cor	ntribution	s from s	such c	ommi	ttee.					
\setminus	NAME OF COMMITTEE (In Full)														
$ \rangle$	JEWISH COUNCIL FOR EDUCAT	ΙΟΝ ΔΝ	D RESEAR	CH											
/	DEVIOUS COOLINGIES ON EDOCAT	10117111	D INCOLAIN	.011											
_	Full Name (Last, First, Middle Initial)														
Α.					Date of Disbursement										
	Chase					_									
	Mailing Address PO Box 260180				10		7		012	* Y					
	Walling Address T O Box 200100				10		,		.012	_					
	City	State	Zip Code												
	Baton Rouge	LA	70826		Trans	action ID	: SB21	1B.933	0						
	Purpose of Disbursement		70020												
	Finance Charges				Amount	of Each	Dishur	semen	t this	Perio	nd				
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	Candidate Name			Category/					1	5.75					
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		Primary	General												
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	Full Name (Last, First, Middle Initial)														
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	Mailing Address 122 Hudson Street				10	ناا	10	2	2012	_					
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	New York	NY	10013												
	Purpose of Disbursement Email Management						D: 1			. .					
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	Candidate Name			Category/		F	4.44								
				Type		7		7							
	Office Sought: House Disbursen														
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	State: District:														
	Full Name (Last, First, Middle Initial)														
C.	Amy Dixon				Date of	Disburse	ement								
					M M	/ D	D /	Y	Y	Υ					
	Mailing Address 365 Irving Avenue				10	C	7	2	012						
	•	State	Zip Code		Trans	action IE) : SB2 ⁻	1B.932	5						
	South Orange	NJ	07079						-						
	Purpose of Disbursement Administrative Services														
					Amount	of Each	Disbur	semen	t this	Perio	od				
	Candidate Name			Category/					22	5.00					
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	Office Sought: House Disbursen														
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	CHEDULE B (FEC Form 3X)	Llos congreto cohodulo(o)					LINE NUMBER: PAGE 10 OF 1									
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	NAME OF COMMITTEE (In Full) JEWISH COUNCIL FOR EDUCAT	ION AN	D RESEAR	СН												
_	Full Name (Last, First, Middle Initial)															
Α.	Miriam Fogelson						Date of Disbursement									
	Mailing Address 146a Nassau Avenue Apt 1			10 12 2012												
	City S Brooklyn	State NY	Zip Code 11222				Trar	sact	ion ID	: SI	321B.93	34				
	Purpose of Disbursement Strategic Consulting				-	\neg	Amou	nt of	Each	Diel	ourseme	nt this	Porio	nd.		
	Candidate Name			Ca	tegor	ry/	Amou	1111 01	Lacii	Disi	Juiscine		0.63			
	Office Sought: House Disbursen	nent For:		•	Type			-	7			304	J.03	_		
	Senate	Primary Other (spe	General cify) ▼													
	State: District:															
В.	Full Name (Last, First, Middle Initial) Adam Pflantzer								sburse							
	Mailing Address 407 30th Street						10	_		9	/ Y	2012	Y			
	Union City	State Zip Code NJ 07087					Trar	nsact	tion ID	: SI	B21B.93	326				
	Purpose of Disbursement Website Development			Г			Amou	ent this	Perio	od						
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		nent For: Primary Other (spe														
С .	Full Name (Last, First, Middle Initial) Sun Suites						Date	of Di	sburse	emer	nt					
	Mailing Address 8530 East Independence Boulevard	d					10		1	^D 7	/ Y	2012	Y			
	Charlotte	State NC	Zip Code 28227				Trar	isaci	tion ID	: SI	B21B.93	39				
	Purpose of Disbursement Lodging - Correct Double Reversal			Г	_		Amou	nt of	Each	Diel	ourseme	nt thin	Dorio	d		
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		nent For: Primary Other (spe	General cify) ▼						,							
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SC	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 11 OF 16							
ITEMIZED DISBURSEMENTS		Use separate schedule(s)					16				
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or	for commercial purposes, other than using the name	ie and addi	ess or any politi	icai committee to	SUICIT CON	เสเมนแดก	s from	such	comm	uee.	
$ \setminus$	NAME OF COMMITTEE (In Full)	1001 441	D DEOE 4 2								
/	JEWISH COUNCIL FOR EDUCAT	ION AN	D KESEAR	CH							
_	Full Name (Last, First, Middle Initial)				ĺ						
A.	The Breslin Bar and Grill				Date of	Disburs	ement	:			
	The Breshir Bar and Onli					M M / P P / Y Y Y					
	Mailing Address 16 West 29th Street				10		04	`	2012	- 1	
	City	State	Zip Code		Trans	aatian II) . CD	24 D 02	27		
	New York	NY	10001		irans	action II) : SB.	216.93	21		
	Purpose of Disbursement										
	Catering				Amount	of Each	Disb	urseme	nt this	Perio	d
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	0/6			Type		7	_	7	3	1.50	_
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		Primary	General								
	President	Other (spec	сіту) 🔻								
_	State: District:										
D	Full Name (Last, First, Middle Initial)				Doto of	Diahura	a ma a n t				
В.	Video Genie				Date of Disbursement						
	Moiling Address AW At A 11 1 000				10		12	/ Y	Y = Y 2012	Y	
	Mailing Address 4 W. 4th Ave Unit 308					-	12		2012	-	
	City State Zip Code										
	San Mateo	CA	94402		Trans	action II	: SB	21B.93	333		
	Purpose of Disbursement				1						
	Video Production				Amount	of Each	Disb	urseme	nt this	Perio	d
	Candidate Name			Category/				-	17	50.00	
				Type		7	_	7	17:	50.00	_
	Office Sought: House Disbursen										
		Primary	General								
		Other (spec	cify) 🔻								
_	State: District:										
_	Full Name (Last, First, Middle Initial)					D: 1					
C.						Date of Disbursement					
	Mailing Address				M M / D D / Y Y Y Y						
	Mailing Address						_		_	_	
	City State Zip Code										
	State Zip Gode										
	Purpose of Disbursement										
					Amount	of Each	Dish	urseme	ent this	Perio	d
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	Senate	Primary	General								
	President	Other (spec	cify) 🔻								
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s	UBTOTAL of Disbursements This Page (optional)							7	206	1.88	
\vdash									4		ī
ΙŢ	OTAL This Period (last nage this line number only)								1764	0.65	

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 12 OF 16

FOR LINE 13 OF FORM 3X

LOAN SOURCE Full Name (La	ist, First, Midd	lle Initial)		Election:
Mik Moore Consulting, LLC				Primary General
Mailing Address 330 7th Avenue Suite 1901				Other (specify) ▼
City New York	(State _{NY} ZIP (Code 10001	
Original Amount of Loan		Cumulative Payment	To Date	Balance Outstanding at Close of This Perio
7	500.00		0.00	500.00
Date Incurred 01 26 20	12 M	Date Du	e Interes	st Rate Secured: 0.00 % (apr) Yes X No
List All Endorsers or Guaranto	rs (if any) to	Loan Source		
1. Full Name (Last, First, Middl	e Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle	e Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle	nitial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle	e Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
JBTOTALS This Period This Pag	o (ontional)			500.00

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 13 OF 16

FOR LINE 13 OF FORM 3X

LOAN SOURCE Full Name (Last, First,	, Middle Initial)	Election:	
Mik Moore Consulting, LLC		Primary General	
Mailing Address 330 7th Avenue Suite 1901		Other (specify) ▼	
City New York	State NY ZIP	Code 10001	
Original Amount of Loan	Cumulative Paymen	To Date Balance Outstanding at Close of This	3 Peri
500.00		0.00 500.0	00
Date Incurred 03 / 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Date I	7 7 7 7 0 00	X
List All Endorsers or Guarantors (if ar	y) to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Stat	e ZIP Code	Amount Guaranteed Outstanding:]
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Stat	e ZIP Code	Amount Guaranteed Outstanding:]
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:]
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Stat	e ZIP Code	Amount Guaranteed Outstanding:]
BTOTALS This Period This Page (option	nal)		00

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 14 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

16

NAME OF COMMITTEE (In Full) JEWISH COUNCIL FOR EDUCATION AND RESEARCH A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Payroll Mikhael Moore Mailing Address 630 Fort Washington Ave State Zip Code New York 10040 Transaction ID: SD10.8257 Outstanding Balance Beginning This Period 5483.14 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 5483.14 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Advertising St. Louis Jewish Light Mailing Address 6 Millstone Campus City State Zip Code St. Louis MO 63146 Outstanding Balance Beginning This Period Transaction ID: SD10.7860 9659.07 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 9387.82 271.25 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period 14870.96 1) SUBTOTALS This Period This Page (optional)..... 14870.96 2) TOTALS This Period (last page this line number only)..... 1000.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 15870.96 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	15	OF	16
FOR L	INE 24	OF F	ORM 3X

FOR LINE 24 OF FORM 3X						
NAME OF COMMITTEE (In Full) JEWISH COUNCIL FOR EDUCATION AND RESEARCH FEC IDENTIFICATION NUMBER ▼						
C C00452847						
Check if 24-hour report 48-hour report New report Amends report f	filed on Mam / Dad / Yayayay					
Full Name (Last, First, Middle Initial) of Payee Detroit Jewish News	Date					
Mailing Address P.O. Box 2267	10					
City State Zip Code Southfield MI 48037	1950.00 Transaction ID : SE.9318					
Purpose of Expenditure Newspaper Advertising Category/ Type	Office Sought: House State: DC Senate District: 00					
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA	President Check One: Support Oppose					
	Disbursement For: Primary General Other (specify)					
Full Name (Last, First, Middle Initial) of Payee Detroit Media Partnership	Date					
Mailing Address 615 W Lafayett Blvd	10 15 2012 Amount					
City State Zip Code Detroit MI 48226	2187.00 Transaction ID : SE.9322					
Purpose of Expenditure Newspaper Advertising Category/ Type	Office Sought: House State: DC Senate District: 00					
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA	President Check One: Support Oppose					
Lalendar fear-to-date Per Election	Disbursement For: Primary General O12 Other (specify)					
(a) SUBTOTAL of Itemized Independent Expenditures	4137.00					
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Mikhael Moore [Electronically Filed] Date	10 22 2012					
Signature						

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	16	OF	16 ORM 3X
FOR I	LINE 24	OF F	ORM 3X

FOR LINE 24 OF FORM 3X						
NAME OF COMMITTEE (In Full) JEWISH COUNCIL FOR EDUCATION AND RESEARCH FEC IDENTIFICATION NUMBER ▼						
C C00452847						
Check if 24-hour report 48-hour report New report Amends report file	ed on Man / Dab / Yayayay					
Full Name (Last, First, Middle Initial) of Payee St. Louis Jewish Light	Date M M / D D / Y Y Y Y					
Mailing Address 6 Millstone Campus	10 10 2012 Amount					
City State Zip Code St. Louis MO 63146	271.25 Transaction ID : SE.9329					
Purpose of Expenditure Advertising Category/ Type Of	ffice Sought: House State: DC Senate District: 00					
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA Cr	President Oppose Support Oppose					
Calendar Year-To-Date Per Election for Office Sought 1887.11	sbursement For: Primary General Other (specify)					
Full Name (Last, First, Middle Initial) of Payee Washtenaw Jewish News	Date					
Mailing Address 2935 Birch Hollow Drive	10 12 2012 Amount					
City State Zip Code Ann Arbor MI 48108	400.00 Transaction ID : SE.9320					
Purpose of Expenditure Newspaper Advertising Category/ Type Of	ffice Sought: House State: DC Senate District: 00					
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA Ch	President Support Oppose					
Calendar Year-To-Date Per Election for Office Sought 27350.00 Diagram 27350.00	Sbursement For: Primary General Other (specify)					
(a) SUBTOTAL of Itemized Independent Expenditures	671.25					
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Mikhael Moore [Electronically Filed] Date	10 22 2012					
Signature						